PTO/SB/17 (02-07)
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| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL | | | | | Complete if Known | | | | |
|--|--------------------------------|-----|-----------|------------|-------------------------------------|--------------------|----------------------------------|----------------|---------|
| | | | | | | | 09/785,385-Conf. #2386 | | |
| | | | | | | | February 16, 2001 | | |
| _ | | | | | 9 | | Charles Jacobus | | |
| For FY 2007 | | | | | | | V. D. Lesniewski | | |
| X Applicant claims small entity status. See 37 CFR 1.27 | | | | | Art Unit 2 | | 2152 | | |
| TOTAL AMOUNT OF PAYMENT (\$) 395.00 | | | | | Attorney Docket No. C | | CYB-07102/03 | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | |
| Check x Credit Card Money Order None Other (please identify): | | | | | | | | | |
| x Deposit Account Deposit Account Number: 07-1180 Deposit Account Name: Gifford, Krass, Sprinkle, Anderson & Citkowski, | | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | | | |
| Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | | | |
| FEE CALCULATION | | | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | | |
| Application T | Small Entity | | | SE. | ARCH FEES Small Entity Fee (\$) | EXAMIN Fee (\$) | IATION FEES Small Entity Fee (S) | <u>Fees Pa</u> | nid (S) |
| Utility | | 300 | 150 | 500 | 250 | 200 | 100 | | |
| Design | | 200 | 100 | 100 | 50 | 130 | 65 | | |
| Plant | | 200 | 100 | 300 | 150 | 160 | 80 | | |
| Reissue | | 300 | 150 | 500 | 250 | 600 | 300 | | |
| Provisional | | 200 | 100 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEES Small Entity | | | | | | | | | |
| Fee Description Fee (S) | | | | | | | | | |
| Each claim over 20 (including Reissues) 50 | | | | | | | | | 25 |
| Each independent claim over 3 (including Reissues) | | | | | | | | 200 | 100 |
| Multiple depend | | | | | | | 360 | 180 | |
| Total Claims | | | Paid (\$) | <u>M</u> : | ultiple Depende | nt Claims | | | |
| | - 20 = | | | | | <u>Fe</u> | <u>e (\$)</u> <u>F</u> | ee Paid (\$) | |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | | | | |
| | | | | | Paid (\$) | | | | |
| - 3 = x = HP = highest number of independent claims paid for, if greater than 3. | | | | | | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (S) Fee Paid (S) | | | | | | | | | |
| | 100 = | | /50 | | (round up to a who | le number) | x : | = | |
| 4. OTHER FEE(S) Fees Paid (S) | | | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | | |
| Other (e.g., late filing surcharge): 2801 Request for continued examination (RCE) (see 37 395.00 | | | | | | | | | |
| SUBMITTED BY | | | 17 | | | | | | |
| Signature | | / | γ | | Registration No. (Attomey/Agent) | 37,424 | Telephone | (734) 913 | -9300 |
| Name (Print/Type) | Name (Print/Type) John G. Posa | | | | | | Date | April 2, 2 | 007 |